

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>11-4-96</u>		2 Serial/Patent # <u>08/709930</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/>	Filing		9-11-96
	Amendment		\$
	Extension of Time		\$
	Notice of Appeal/Appeal		\$
	Petition		\$
	Issue		\$
	Cert of Correction/Terminal Disc.		\$
	Maintenance		\$
	Assignment		\$
	Other		\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>39.00</u>
		8 TO BE REFUNDED BY:	
10 REASON:		Treasury Check	
<input checked="" type="checkbox"/>	Overpayment	Credit Deposit A/C #:	
	Duplicate Payment	9 <u>210--1430</u>	
	No Fee Due (Explanation):		
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Moliki May</u>		TITLE: <u>Legal Instr. Examiner</u>	
SIGNATURE: <u>Moliki May</u>		PHONE: <u>703-308-1157</u>	
OFFICE: <u>ONAR</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>Donald O. Henry</u>		DATE: <u>14 NOV 96</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: